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Measuring Non-Parental Care in the NLSCY: Content and Process Issues

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by
Christina Norris, Satya Brink and Patricia Mosher

August 1999

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Abstract

The purpose of this paper is to examine content and process issues for collecting data on non-parental care in the National Longitudinal Survey of Children and Youth (NLSCY). The authors use work done by the Human Resources Investment Branch (HRIB) of Human Resources Development Canada and related studies.

The content of the HRIB and NLSCY surveys demonstrates that it is possible to obtain information from parents and caregivers on the child's care environment. Information on type of care, characteristics of care providers and quality of care can be used as variables to study their impact on child outcomes. Additional questions for parents could be included in the NLSCY to help fill some gaps in content (cost, accessibility of care, etc.).

But a new survey of care providers is needed to better measure quality of care, including characteristics of care providers, information on training and education, types of activities the provider does with the child and providers' reasons for caring for children. With reliable data, research results can then be used to help inform policy decisions on the combination of factors needed to assure positive and healthy care environments for all of Canada's children.

Résumé

L'article examine les questions de contenu et de processus liés à la collecte de données sur la garde des enfants par des personnes autres que les parents, dans le cadre de l'Enquête longitudinale nationale sur les enfants et les jeunes (ELNEJ). Les auteurs se sont appuyés sur des travaux de la Direction générale de l'investissement dans les ressources humaines (DGIRH), Développement des ressources humaines Canada, et des études connexes.

Les études de la DGIRH et l'ELNEJ montrent qu'il est possible d'obtenir des parents et des autres personnes concernées des renseignements sur le milieu de garde de l'enfant. Des données sur le mode de garde, les caractéristiques des personnes qui fournissent ce service et sur la qualité des soins peuvent servir de variables pour étudier l'incidence du milieu de garde sur les résultats obtenus par l'enfant. Des questions additionnelles à l'intention des parents pourraient être incluses dans l'ELNEJ, afin de combler certaines lacunes sur le plan du contenu (coût, accessibilité des services de garde, etc.).

Mais il faut procéder à une nouvelle enquête sur les fournisseurs de services de garde si l'on veut mieux mesurer la qualité des soins. Celle-ci porterait notamment sur les caractéristiques des fournisseurs de services de garde, la formation et le niveau d'études de ces personnes, le type d'activités qu'elles organisent avec l'enfant et les raisons pour lesquelles elles ont choisi d'offrir ce service. Les données fiables résultant d'une telle recherche pourraient aider à la prise de décisions stratégiques éclairées quant aux facteurs qui doivent se trouver réunis pour que tous les enfants canadiens puissent évoluer dans un milieu de garde dynamique et sain.

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Executive Summary

One of the areas being studied using the National Longitudinal Survey of Children and Youth (NLSCY) is the impact of non-parental care on child outcomes. Past research shows that high quality non-parental care is clearly associated with positive developmental outcomes. Children in high quality care have enhanced social and language skills, fewer behaviour problems, and increased cooperative skills (Love, Schochet, Meckstroth, 1996). These skills in turn lead to improved academic success in children and youth and to later adult competence. Thus, the solid foundation of the early years is essential for later adult success (Doherty, 1997).

In 1994, there were approximately 4.6 million children aged (aged 0 – 11) in Canada. A third (33.2%) of these children were in some form of non-parental care. Forty percent (39.9%) of all children aged five or less and just over a quarter (26.5%) of all children aged 6 to 11 were in some form of non-parental care. The majority of all children in care (60.2%) were aged five or less. More Canadian parents (40%) used unregulated family-care more than any other form of non-parental care. The use of day care centres ranked a distant second at 20.1 percent. Parents in the lowest socioeconomic quintile, lone parents, very young mothers, and mothers with less than a secondary school diploma were most likely to place their children in day care centres.

Work sponsored by the Canadian Day Care Advocacy Association and the Canadian Child Day Care Federation (1992) profiled centre-based care in Canada. Extensive work has more recently been done by the Human Resources Investment Branch (HRIB) of Human Resources Development Canada to profile the paid child care workforce working both inside and outside of day care centres. As the vast majority of children in non-parental care under the age of 6 are not cared for in a day-care centre, understanding the issues on unregulated care summarized by the HRIB reports is essential in informing survey development decisions for the NLSCY. These surveys and reports offer a wide range of information.

The purpose of this paper therefore, is to use the work done by HRIB on the child care sector and related studies to examine content and process issues for collecting data on non-parental care in the NLSCY. Overall, the content of both the HRIB and the NLSCY surveys demonstrate that a variety of information on the child's care environment is possible to obtain. Information on the

type of care, the characteristics of the care provider, and the quality of the care can be used as variables to study their impact on child outcomes. This information can be obtained by surveying parents and caregivers through the NSLCY. Additional questions for parents could help fill some gaps in content (cost, accessibility of care, etc.). But a new survey of care providers is needed to better measure quality of care, including characteristics of the care provider, information on training and education, the types of activities the provider does with the child, and the provider's intentionality in providing care (the reasons the provider cares for children). With reliable data, research results can then be used to help inform policy decisions on the combination of factors needed to assure positive and healthy care environments for all of Canada's children.

1. Introduction

1.1 Purpose

The involvement of the Applied Research Branch (ARB) of Human Resources Development Canada (HRDC) in child development issues has been well established through the management of the National Longitudinal Survey of Children and Youth (NLSCY). The broad goals of the survey are to support research on the factors affecting child development and well-being and the way they influence child outcomes in Canada. Research results are being provided to policy and program officials for use in developing effective policies and strategies to help young people follow healthy, active, and rewarding life paths.

One of the areas being studied using the NLSCY is the impact of non-parental care on child outcomes. Past research shows that high quality non-parental care is clearly associated with positive developmental outcomes. Children in high quality care have enhanced social and language skills, fewer behaviour problems, and increased cooperative skills (Love, Schochet, Meckstroth, 1996). These skills in turn lead to improved academic success in children and youth and to later adult competence. Thus, the solid foundation of the early years is essential for adult success (Doherty, 1997).

In order to highlight some of the issues about the quality of the child care environment and to further understand the ways that non-parental care can have an impact on children's development, the following research questions have been proposed for studying the impact of non-parental care (Connor & Brink, in press):

1. What are the types of non-parental care that Canadian children experience?
2. How do the various types of non-parental care affect children's outcomes?
3. How do factors associated with each type of non-parental care affect child outcomes?
    - care in the child's home versus care outside of the child's home
    - characteristics of the caregiver
    - quality or nature of programs

4. What factors (income, parents' education, location, cost) affect the choice of non-parental care?

Earlier work sponsored by the Canadian Day Care Advocacy Association and the Canadian Child Day Care Federation (1992) profiled centre-based care in Canada. Extensive work has more recently been done by the Human Resources Investment Branch (HRIB) of HRDC to profile the paid child care workforce working outside of day care centres. A main report was published titled "Our Child Care Workforce: From Recognition to Renumeration" (Beach, Bertrand, & Cleveland, 1998). Three other reports profiling providers working in both regulated and unregulated settings were also published in 1998: (1) "Providing Home Child Care for a Living: A Survey of Providers Working in the Unregulated Sector in the Child's Home"; (2) "Providing Home Child Care for a Living: A Survey of Providers Working in the Unregulated Sector in their Own Home"; and (3) "Providing Home Child Care for a Living: A Survey of Providers Working in the Regulated Sector" (HRDC child care sector study reports). As the vast majority of children in non-parental care under the age of 6 are not cared for in a day-care centre, understanding the issues on unregulated care summarized by the HRIB reports is essential for survey development decisions for the NLSCY. These surveys and reports offer a wide range of information.

The purpose and value of this paper therefore, will be to use the work done by HRIB on the child care sector and related studies to look examine content and process issues for gathering data on non-parental care to ensure the collection of complete non-parental care information through the NLSCY.

1.2 Context

Over the past 30 years, there has been a 400 percent increase in the use of paid child care services (Beach, Bertrand, & Cleveland, 1998). In 1994 - 1995, 39.9 percent of Canadian children age five or younger or approximately 33.2 percent aged newborn to eleven were receiving some form of regular non-parental care (Ross, Scott and Kelly, 1996). The reasons such a large percentage of children who received non-parental care could be due to: an increase in maternal employment, and a shift in the focus of non-parental care.

First of all, there has been a dramatic increase from 17 percent in 1967 to 65 percent in 1997 in the rate of maternal employment for mothers with pre-school children (Beach, Bertrand, & Cleveland, 1998). Secondly, there has been an evolution in the rationale for child minding, from a convenience for parents to fostering development of the child. Parents want non-parental care to be more than simply adult supervision. They consider the quality of the child's non-parental care to be as important as the hours and location of care. They want care providers to offer emotional warmth and a physically and cognitively challenging environment for their child.

Parents rely on a variety of child care options and it is not clear whether they obtain the care of their choice. Approximately one fifth of children under age six are cared for in their own home, thus benefiting from a familiar environment. Most of such care (14.1%) for children under age 6 is provided by a non-relative. However, the vast majority of children (77.9%) are cared for outside the home, with close to half of these (48%) being cared for in an unregulated setting. A similar trends holds true with care for children aged six to eleven (see Table 1 and Chart 1).

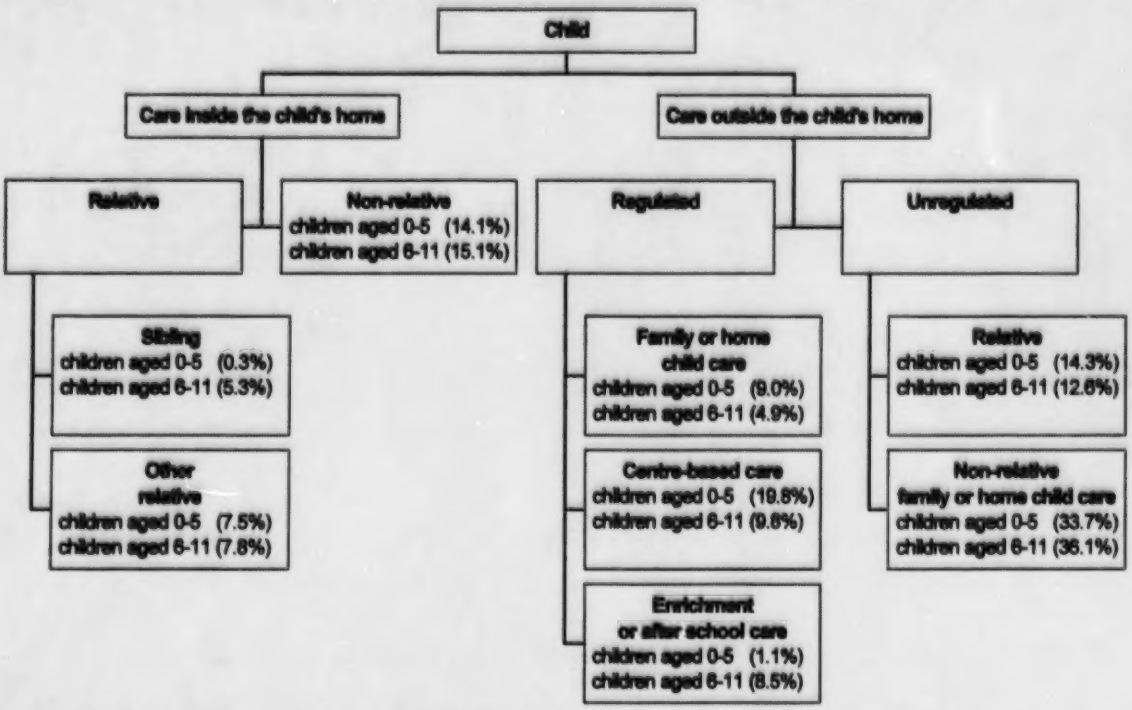
There are other important demographic shifts taking place in our society that will impact on the demand and use of non-parental care. The actual number of children less than six years of age will not change very much in the next five to ten years. The number of people in older cohorts will increase, and the number of children under ten will actually decline from 4.028 million children in 1996 to 3.997 million children over the next 15 years. The main reason for this is the Canadian fertility rate of 1.7. Women are postponing and therefore reducing the number of children they have (Beach, Bertrand, and Cleveland, 1998).

Table 1 Overall percentage of children in unregulated and regulated care

Age of children	*Unregulated care inside the child's home*	*Unregulated care outside the child's home*	*Regulated care outside the home*
0 to 5 years old	21.9	48.0	29.9
6 to 11 years old	28.2	48.7	23.2

Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-11), 1994.

Chart 1 Distribution of children among types of non-parental care



Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-11), 1994.

Therefore, because Canada's birth rate is low, immigration is becoming more and more important to maintain population growth. In 1995, there were 215,700 new immigrants to Canada. This number will increase to 250,000 per year over the next several years, with many more immigrants than ever before coming from non-European countries (Beach, Bertrand, and Cleveland, 1998).

These demographic shifts in the population lead to increases in the number of non-parental care spaces needed in the country. Predictions are such that over the next five years, approximately an additional 4,000 centre-based workers, 17,000 family child caregivers, and 11,5000 caregivers working in the child's home will be required each year to meet the needs of Canadian families with children (Beach, Bertrand, & Cleveland, 1998). Non-parental care is becoming a common experience for children in their growing years. Therefore, it is important to research the impact of this care on child development; as evidence-based policies can be implemented by decision makers.

1.3 Terms and definitions

Early research on non-parental care (1970s) focused principally upon disadvantaged children growing up in high-quality, university-based day care centres. As a result, much of the research has focused on day-care in regulated centres, and this form of care is often equated with the term child care itself.

Research supports that both structural (caregiver training and characteristics, adult-to-child ratios) and process (quality of interactions between the care giver and child) factors of quality care are key to ensuring that the non-parental care experience is positive for the child's emotional, cognitive, and behavioural development. Research also shows that the care experience can have different influences for children of different ages.

However, non-parental care can include many different forms of care and there has been insufficient research examining these different types of care. Non-parental care can include care inside or outside the child's home. Care in the child's home includes care by a relative or a non-relative. Non-relative care in-the-child's-home can include nannies who are provided room and board in the child's house and other caregivers who come into the child's house during the day. These non-relative caregivers may be arranged through agencies, however they are not typically regulated beyond normal business regulation (Beach, Bertrand, & Cleveland, 1998). Care outside the child's home can take several forms: care in someone else's home by a licensed provider (regulated family day care); care in someone else's home by an unlicensed provider (unregulated family day care); care in a relative's home; group-care in a licensed day-care centre; and care in a before or after school or enrichment program.

There is a lack of consistency in the literature about the definition of child care. The term non-parental care has more recently emerged to reflect the heterogeneity of the type of child care arrangements received by children. Some authors use the term *nonfamilial* care interchangeably with non-parental care. Both terms refer to care arrangements for children with the exception of care by parents. The term *alternative care-giving context and non-maternal care* are also used in the literature. The application of the term *child care* is more ambiguous although it is the most widely used. The term *family child care, family day care* and *day care home* are most often used to refer to the care of unrelated children in the home of the provider. As well, *relative care* is

sometimes defined as care in the relative's home. The term *after-school care* tends to be defined more broadly than the words themselves suggest. Since many parents work early mornings or late evenings, some children might be placed in various forms of non-parental care during these times.

Therefore, many authors have expanded the timeframe to include not only afternoons, but also mornings and evenings. In their work on paid non-parental care outside day care centres, Beach, Bertrand, and Cleveland (1998) defined non-parental care as paid care on a regular basis (10 hours a week at least eight months of the year) while the parent(s) work or study.

For the purpose of this paper, the term non-parental care will be used to define care by someone other than a parent. Non-parental care will be defined as regular paid or unpaid care by a non-parental caregiver while a parent is working or studying. Thus, occasional or casual child-care or babysitting will not be included in this definition. Non-parental care will be studied using the typology in Chart 1; since for policy purposes, it is important to know if different types of care lead to different child outcomes.

1.4 Summary

Non-parental care for the purposes of this paper is regular paid or unpaid care (by someone other than a parent) that a child receives while the parent(s) is (are) working or studying. Non-parental care can have very beneficial impacts on children. There is a need for continued research on non-parental care partly because of changing demographic trends in Canada. As well, many of the previous studies have looked at children in day care centres alone, when in Canada today the majority of children are in unregulated family day care settings. The NLSCY will be used as the vehicle to collect sufficient data to enable such research.

2. The pattern of non-parental care in Canada

2.1 Context

In order to help inform content development decisions on non-parental care from the NLSCY, it is important to learn from the work previously done on the child care sector by the Human Resources Investment Branch (HRIB) of HRDC. As mentioned earlier, three reports were prepared profiling the characteristics of the paid child care workforce working outside of day care centres. These reports look at renumerated non-parental care from the supply perspective and provide valuable insights into important characteristics of care providers. The NLSCY looks at non-parental care from the demand perspective and is interested in measuring the impact of the quality of care on child development.

The following information is based on summary data from the NLSCY, reports from HRIB of HRDC, and a report on centre-based care called Caring for a Living. This information highlights some of the kinds of data an augmented NLSCY will allow.

2.2 Profile of children in care

In 1994-95, there were approximately 4.6 million children aged (aged 0 – 11) in Canada. Approximately a third (33.2%) of these children were in some form of non-parental care. Forty percent (39.9%) of all children aged five or less and just over a quarter (26.5%) of all children aged 6 to 11 were in some form of non-parental care. The majority of all children in care (60.2%) were aged five or less.

2.3 School-aged children and non-parental care

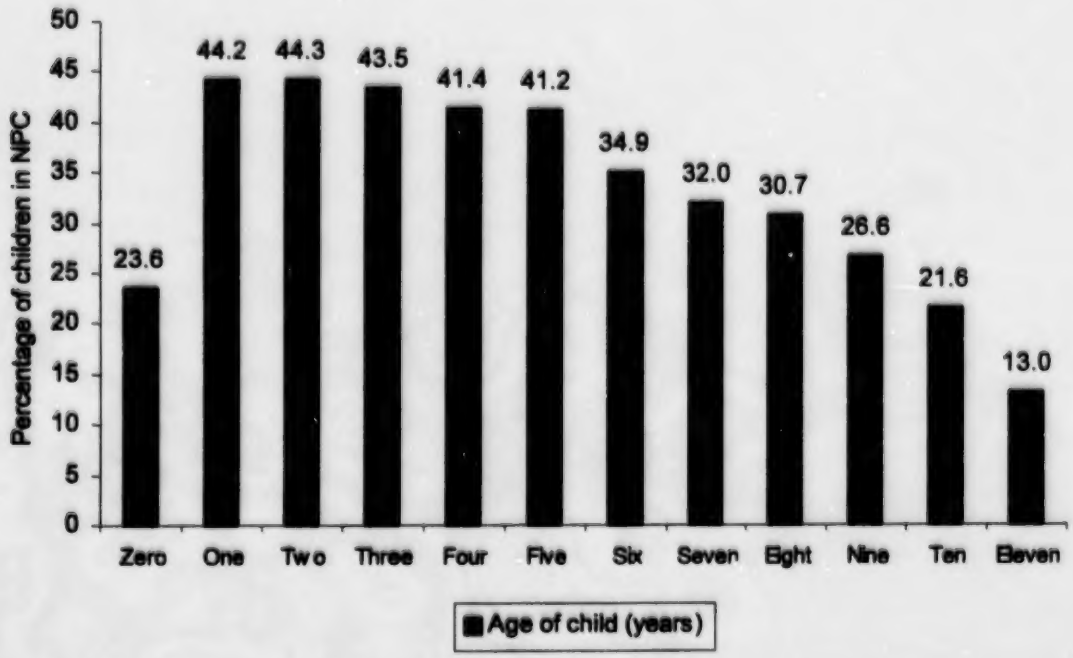
The pattern of non-parental care use was similar for children aged six to eleven as for pre-school children, with three exceptions (see Table 2). Not surprisingly, more school-aged children attended before or after school programs and fewer attended day care centres than children less than age six (see Chart 2). These finding are due simply to the commencement and/or continuation of formal schooling for children aged six or older.

Table 2 Few children aged six to eleven use centre-based programs

	Age of child (% of children)		
Form of NPC	***0-5***	***6-11***	***Total***
Family-care, regulated	9.0	4.9	7.4
Family-care, unregulated	33.7	36.1	34.6
Relative's home, unregulated	14.3	12.6	13.6
Own home relative (non-sibling), regulated	7.5	7.8	7.7
Own home sibling, unregulated	0.3	5.3	2.3
Own home non-relative, unregulated	14.1	15.1	14.5
Day care centre, regulated	19.8	9.8	15.9
Before or after-school program, regulated	1.1	8.5	4.0
Total	100.0	100.0	100.0

Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-11), 1994.

Chart 2 The highest proportion of children using non-parental care were aged 1 to 5 years



Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-11), 1994.

Sibling care was used slightly more and regulated family-care was slightly less common for school-aged children than for younger children. Parents likely felt more confident leaving school-aged children with older siblings than leaving younger children without adult supervision. As well, regulated care (either family or centre-based care) was likely being replaced by before or after school programs for school-aged children.

Children were in various forms of non-parental care, with more children in unregulated care settings than in any other form of non-parental care (Table 2). The patterns of non-parental care were similar for children in both age groups, with the exception of sibling care and before or after school care which were more common for children in the older age group.

2.4 Profile of non-parental caregivers

Care providers working in their own home tended to be slightly older and more often married with children of their own, as compared to providers working in either the child's home or a day care centre (Table 3). Almost all providers had a high school diploma; however, providers working in day care centres were more likely to have a post-secondary degree or diploma than providers working in any other setting. The lowest provider-to-child ratio was achieved when children were cared for in their own home, although these providers also had the lowest incomes. Close to sixty percent of providers working in settings other than day care centres had at least five years of experience in a child care setting. It is likely that providers working in day care centres were more often younger and recently out of school.

Table 3 Characteristics of providers working in various types of non-parental care settings

	Child's home[1]	*Provider's home (regulated)*[1]	*Provider's home (unregulated)*[1]	*Care centres*[2]
% of providers whose age is 30-39 years	20	46	47	26
% of providers who are single	54	11	18	37
% of providers who have children	23	87	81	41
% who have a high school diploma	77	85	86	85
% who have a post-secondary diploma or degree	28	36	33	48
The mean number of children in provider's care	2.3	4.9	3.5	Not available
% of providers caring for a special needs child	11	17	12	Not available
The mean gross annual income for providers (and teachers for day care centres)	$8,700	$15,600	$10,400	$18,500
The mean income of providers by child	$3,700	$3,200	$3,000	Not available
% of providers with 5 or more years of experience in the field	58	60	58	47

Sources: (1) HRDC child care sector study reports (1998). (2) Caring for a Living (1992).

2.5 Cost of non-parental care and adult-to-child ratios

Parents spent various amounts of money for different forms of non-parental care. Both the type of care and the age of the child had an impact on the cost of non-parental care. First of all, care in the child's home was the most expensive form of non-parental care, but these care providers made the lowest annual wages as they likely care for a smaller number of children than other providers.

As well, the age of the child is related to the adult-to-child ratio that is needed; with younger children needing a lower adult-to-child ratio than older children (Table 4). In turn, these ratio needs impacted on the cost of care. Non-parental care was more expensive for infants than for older toddlers and preschoolers. The 1996 national average monthly cost for infants in day care centres was $458. This number decreased to $424 for toddlers, $392 for preschoolers, and $309 for school-age children (Beach, Bertrand, and Cleveland, 1998).

Table 4 Average number of children per adult in various forms of care settings

Form of NPC	*Age of child*	*Average number of children*
Family-care regulated[1]		4.9
Family-care unregulated[1]		3.5
Own home non-relative[1]		2.3
Day care centre[2] *	children under 2 years	4.0
	children age 2 – 3 years	7.0
	children aged 4 – 5 years	9.0

* These numbers are the recommended maximum number of children per adult; these numbers do not necessarily reflect actual care centre adult-to-child ratios.
Sources: (1) HRDC child care sector study reports (1998). (2) Caring for a Living (1992).

2.6 The NLSCY's role in understanding the pattern of non-parental care

The NLSCY supports the understanding of factors affecting child development and well-being and the way they influence child outcomes in Canada. The goals of the NLSCY are to improve our understanding of child development in an holistic way. The research based on the NLSCY data makes it possible to examine the relationship between outcomes and a variety of biological, social, and economic characteristics and risk factors in children and youth.

A key focus of research is the impact of family and school variables on child development. An emerging issue is the role that non-parental care plays in child development, especially for young children. In 1994, approximately 40 percent of Canadian children were in some form of non-parental care. The NLSCY currently asks parents questions about their children's caregiver, but more data are needed to study the impact of non-parental care on child outcomes.

Research indicates that children who experience positive child development at a young age will be better prepared to succeed first at school, and later in the labour market. Children in non-parental care who are prepared for school have care that includes the promotion of: (1) safety and good physical health (through fine and gross motor activities); (2) emotional health (through a provider who is warm and sensitive to the child's needs and encourages positive self-esteem); (3) social knowledge and competence (through a care environment that encourages positive interaction with adults and children, and supports social norms); and (4) cognitive skills (through activities related to reading, writing, and sorting) (Beach, Bertrand, and Cleveland, 1998).

3. Profiling the type of non-parental care and family socio-demographic factors

The patterns of use of non-parental care may vary by various socio-demographic factors. This chapter will focus on the type of non-parental care profiled by these socio-demographic factors: socio-economic status, region, family status, age of mother, size of city, mother's education, and labour force status of mother.

3.1 Socio-economic status

The proportion of parents (of children aged newborn to five) that used some form of non-parental care for their children increased as levels of socio-economic status (SES)[1] increased. Just under a quarter of families (23.8%) in the lowest SES quintile used non-parental care; whereas more than half (51.8%) of families in the highest quintile used some form of non-parental care. The most often used form of non-parental care for all families (except those in the lowest SES quintile) was unregulated family-care (Table 5). Most children in the lowest SES quintile were in day care centres. This may be due in part to government subsidies that are made available to families with low income. The three most popular care settings for children in the three lowest SES quintiles were: unregulated family-care, care in a relative's home, and care in day care centres. However, the three most popular forms of non-parental care for children in the two highest SES quintiles were: unregulated family-care, centre-based care, and care in the child's home by a non-relative. Care in the child's home is a form of care that is relatively more expensive (except for care by a relative), which may explain why only parents in the two highest SES quintiles are able to afford this form of non-parental care. Parents, being more educated, may also feel they can control the environment and type of care activities when the child is cared for at home.

[1] The socio-economic status (SES) measure is a derived variable in the NLSCY created from variables including: the education level of both parents, the occupational prestige of both parents, and household income. For this paper, SES scores were divided into quintiles meaning that 20 percent of the children were in each of the five SES categories.

Table 5 Children from low SES families use day care centres most often

	SES Quintiles (% of children)					
Form of NPC	***1***	***2***	***3***	***4***	***5***	***Total***
Family-care regulated	11.3	7.0	8.7	7.2	11.8	9.2
Family-care unregulated	19.5	34.8	35.5	40.7	33.7	34.2
Relative's home	17.9	19.4	18.0	12.2	9.1	14.5
Own home relative	10.4	9.2	7.3	6.8	6.3	7.7
Own home non-relative	10.9	11.9	9.8	14.7	20.8	14.3
Day care centre	30.0	17.6	20.7	18.4	18.2	20.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994.

3.2 Regions

The use of regulated family child care and day care centres was the lowest in the Atlantic provinces (P.E.I., Newfoundland, Nova Scotia, New Brunswick) than in the other four regions of the country (Table 6). The use of unregulated care in the Atlantic provinces was likely due the fact that there are fewer regulations in these provinces than in the rest of the country (Beach, Bertrand, & Cleveland, 1998). Day care centres were used most often in Quebec where special government controlled rates are being offered to parents who put their children in day care. As well, relative care (whether it be in the child's home or in the relative's home) is most popular in the Atlantic provinces and in British Columbia.

Table 6 The Atlantic region has the fewest children in regulated care

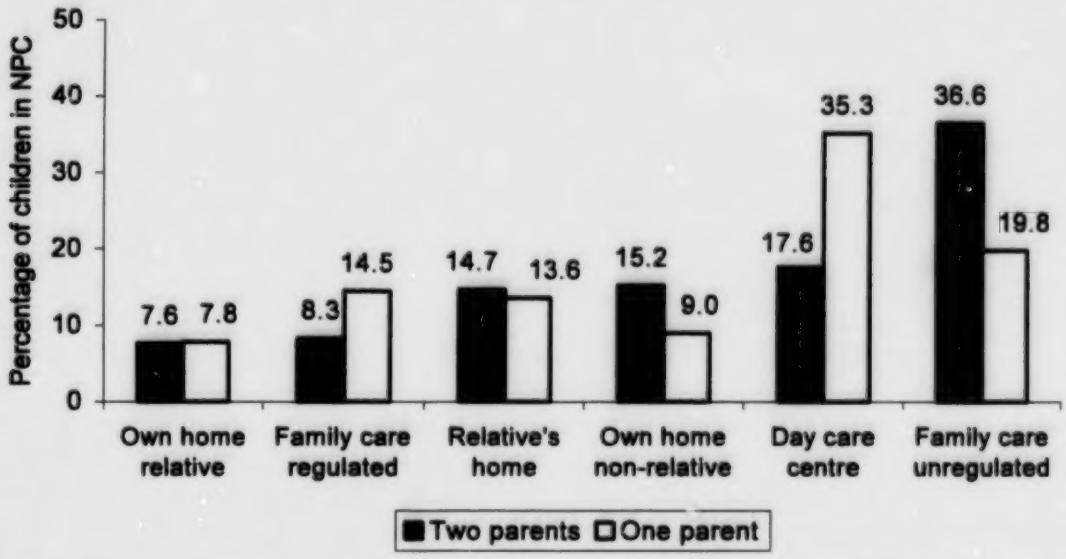
	Region (% of children)					
Form of NPC	***Atlantic***	***Quebec***	***Prairies***	***BC***	***Ontario***	***Total***
Family-care regulated	2.7	9.6	10.5	13.4	8.3	9.2
Family-care unregulated	28.3	33.1	38.5	27.1	35.9	34.2
Relative's home	16.4	15.0	14.9	17.1	13.1	14.5
Own home relative	11.6	4.0	4.8	8.7	10.3	7.7
Own home non-relative	21.9	13.3	11.8	22.2	12.7	14.3
Day care centre	19.0	25.0	19.5	11.6	19.8	20.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994.

3.3 Family Status

The proportion of two-parent (40.0%) and one-parent (39.1%) families that used some form of non-parental care while they were working or studying was the same. The forms of non-parental care do differ however, across family structure (Chart 3). One-parent families tended to use day care centres more than two-parent families. Many one-parent families are also low-income families and therefore may be eligible for subsidized day care placements. Two-parent families were more likely to use unregulated family-care settings and care in the child's home by a non-relative.

Chart 3 One-parent families use day care centres more often than two-parent families



Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994.

3.4 Age of mother at birth of child

Mothers who were between the ages of 15 and 24 (32.9%) or older than 40 years (32.2%) at the time of their child's birth were less likely to use non-parental care than mothers who were between the ages of 25 and 39 (41.0% to 44.0%). However, mothers in the youngest and oldest age categories who did use some form of non-parental care were more likely to use day care centres than mothers between the ages of 25 and 39 (these mothers were more likely to use unregulated family day care) (Table 7). Mothers aged 24 or less are more likely to have less income than older mothers and may therefore qualify for day care centre subsidies. On the other

hand, mothers over the age of 40 are most likely working mothers who delayed having children until their careers were well under way. These mothers would be in a better position to afford the high cost of child care centres.

Table 7 Younger mothers and older mothers most likely to use day care centres

	Age of mother at birth of child (% of children)					
Form of NPC	***15-24***	***25-29***	***30-34***	***35-39***	***40+***	***Total***
Family-care regulated	11.2	8.6	9.1	8.9	1.0	9.2
Family-care unregulated	23.6	38.1	36.0	34.6	24.0	34.2
Relative's home	20.9	18.1	9.8	7.4	4.5	14.5
Own home relative	8.3	6.2	7.8	10.2	3.9	7.7
Own home non-relative	10.7	10.5	19.6	17.8	20.4	14.3
Day care centre	25.2	18.4	17.7	21.0	46.2	20.1
Total	100.0	100.0	100.0	100.0	100.0	100.0

Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994.

As well, mothers over the age of 40 were the least likely to use any form of relative care whereas mothers in the youngest age category were the most likely to use some form of relative care. Traditionally, the relative providing non-parental care is the child's grandmother. In the case of mothers over the age of 40, many may not have a mother who is physically able or willing to care for a child. Younger mothers, on the other hand, are more likely to have younger mothers themselves, who may still be in the position to care for children.

3.5 Urban and rural areas

Fewer children in rural areas (34.9%) used non-parental care as compared to those living in cities (39.7% to 42.2%). Day care centres were used most often by children in large urban areas and used least often in rural areas in the country. Unregulated care was the form of care used most in all areas, but there was an even greater reliance on this form of care in the rural areas. As well, relative care was slightly more common in smaller cities and rural areas as opposed to larger cities (Table 8).

Table 8 Unregulated family-care is most popular in rural areas

Form of NPC	*Population (urban and rural areas) (% of children)*						
	Urban (pop greater than 499,999)	Urban (pop 100,000 to 499,999)	Urban (pop 30,000 to 99,999)	Urban (pop 15,000 to 29,999)	Urban (pop less than 15,000)	Rural	Total
Family-care regulated	9.3	6.0	15.0	10.3	12.2	7.5	9.2
Family-care unregulated	31.8	35.7	31.8	39.0	30.8	42.1	34.2
Relative's home	12.6	14.7	14.0	13.7	17.0	19.5	14.5
Own home relative	8.6	8.0	4.8	5.2	5.1	7.8	7.7
Own home non-relative	14.6	14.2	13.6	14.9	18.8	11.4	14.3
Day care centre	23.1	21.5	20.9	17.0	16.0	11.7	20.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

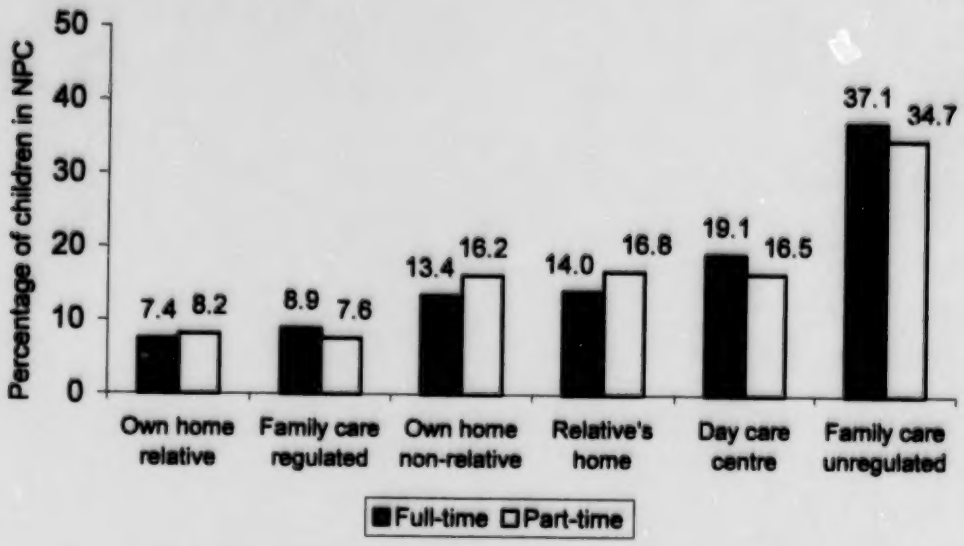
Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994.

Families living in rural areas do not have the same access to a wide range of child care alternatives. Unregulated family child care may be the only option for many rural families whose communities lack child care resources (Beach, Bertrand, & Cleveland, 1998).

3.6 Labour force status of mother

The majority of working mothers used some form of non-parental care. Mothers working full-time hours (67.8%) used non-parental care more than mothers working part-time hours (51.5%). Mothers working part-time hours may be able to arrange their time at work so that their spouse can care for their child. Women working full-time had the same pattern of non-parental care use as women who worked part-time (Chart 4). Women who worked part-time used relative care slightly more often and centre-based care slightly less often than women who worked full-time.

Chart 4 Women working part-time use the same forms of non-parental care as those working full-time



Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994.

3.7 Mother's education

The use of non-parental care increased as mothers' level of education increased. Less than a quarter of mothers (23.9%) who did not finish a secondary school diploma used some form of non-parental care. This compares to close to half (49.0%) of mothers with a college or university education who used some form of non-parental care. With the exception of mothers with less a than secondary school education, most families used unregulated family day care (Table 9). Mothers with less than secondary school education were more likely to use day care centres. These mothers probably also have low income and would therefore be more likely to use subsidized day care centre placements for their children. These patterns closely resemble the pattern of non-parental care use for families of various socio-economic status groups. These results may highlight the dilema that educated working mothers face. They have to weigh the opportunity costs of not working against the quality of care they wish for their children.

Table 9 Mothers who did not complete secondary school are more likely to use day care centres

	Education level of mother (% of children)				
Form of NPC	***Less than secondary***	***Secondary school***	***Beyond high school***	***College or university***	***Total***
Family-care regulated	7.2	11.5	9.2	8.9	9.2
Family-care unregulated	24.4	31.7	35.0	36.3	34.2
Relative's home	17.7	19.4	13.5	13.1	14.5
Own home relative	8.8	5.7	8.9	7.3	7.7
Own home non-relative	12.4	13.5	13.3	15.5	14.3
Day care centre	29.6	18.2	20.2	18.8	20.1
Total	100.0	100.0	100.0	100.0	100.0

Source: National Longitudinal Survey of Children and Youth, Cycle 1 (children aged 0-5), 1994

3.8 Summary

Overall, unregulated care was the most common care option with 34.2 percent of parents using this form of non-parental care. Care in a day care centre was next popular (20.1%), followed by relative care in the relative's home (14.5%), care in the child's home by a non-relative (14.3%) and regulated family-care (9.2%). Finally, care in the child's home by a relative was used least often (7.7%).

The above profiles showed that parents in the lowest SES quintile, lone parents, very young mothers, and mothers with less than a secondary school diploma were most likely to place their children in day care centres. All of these socio-demographic characteristics are either related to – or are part of – SES. Basically, very young mothers are less likely to have finished post-secondary education and these mothers are more likely to have low incomes. Similarly, lone parent status is very often related to low income. These factors make mothers with these characteristics more likely to be eligible for subsidized day care centre placements for their children. Interestingly, older mothers (who may have more education and therefore more income) used day care centres more than any other form of non-parental care. Parents living in rural areas were much more likely than parents in any other size of city to use unregulated family-care. These rural parents often do not have other non-parental care choices because of accessibility issues.

These figures and profiles are important to our understanding of how non-parental care should be measured in the NLSCY. It is clearly very important to understand the unregulated family-care setting, as it is the care type most often used. Questions asked of parents, and/or non-parental care providers need to be sensitive to providers working in a range of settings; particularly as more than one in five children is in relative care. Research on the varying impacts of non-parental care on child outcomes will only be possible if the NLSCY collects data on the full range of non-parental care experiences.

4. Review of survey questions: The NLSCY and the child care sector studies and reports

The NLSCY can benefit from questions that have been previously used, when HRIB undertook the child care sector study. The NLSCY and the child care sector reports examine non-parental care from different perspectives. The NLSCY collects data that is focused on the child, while the HRIB reports focused on profiling care providers. The HRIB reports provide important non-parental care information on issues relating to caregivers: training, remuneration, benefits, and recognition. The NLSCY would like to augment existing questions on non-parental care by adding questions about the structural and process aspects of quality of non-parental care. This review will indicate if an expanded parent questionnaire of the NLSCY is sufficient or if a care provider survey needs to also be done.

The HRIB child-care sector reports present much information on issues relating to the type of care, the licensing of the caregiver, as well as many characteristics of the caregiver. The NLSCY asks parents about the type of care, the length of time the child has been in care, as well as measuring the number of changes the child has had in non-parental care. Neither survey measures the quality of non-parental care. Quality care was not relevant for the HRIB sector studies reports; whereas understanding the quality of non-parental care and its impact on child outcomes is becoming an increasingly important issue for the research using the NLSCY.

The purpose of this section of the paper is to review the content of both the NLSCY and the recently completed sector studies reports in order to fill gaps in content on non-parental care in the NLSCY. Any gaps can be filled using questions from the sector studies surveys and/or from the many other non-parental care surveys that have been conducted in the United States and other countries. The survey questions themselves are reviewed with the intention of evaluating what types of questions can be asked of parents and what questions would be better asked of the care provider herself. The tables in this section all contain survey questions from the NLSCY and the sector studies surveys. The content of the surveys is divided into several topics so that a short description of the topic can help evaluate the appropriateness of the survey questions. The content topics include: characteristics of care, characteristics of the care provider, quality of care, and child outcomes.

4.1 Characteristics of care

As previously discussed, there are several different types of care available for Canadian children. The availability, cost, and quality of non-parental care, as well as the characteristics of the caregiver, may vary for each type of care. Other important aspects of non-parental care include the length of time the child is in care, the ratio of the provider to children, and the changes in care arrangements. Care can take place in the child's home or outside of the child's home. The provider caring for a child in the child's home can be either a relative or a non-relative. Care in the child's home is considered unregulated. Care out of the child's home can take place in a regulated or an unregulated setting. A regulated setting can include: a licensed provider's home, a day care centre, or an enrichment program. Unregulated settings can include an unlicensed provider's home or the home of a relative.

The affordability and accessibility of care are issues dealt with by HRIB in their reports. The type of care available varies significantly by geography, provincial/territorial regulation, funding, and parents' ability to pay for care. On the surface, it appears that parents have many non-parental care choices, but as the reports note, parents often choose options based on cost and availability rather than the type of care that they would ideally choose for their child (Beach, Bertrand, Cleveland, 1998).

Box 1 Questions on the characteristics of non-parental care

HRDC child care sector study reports, 1998

- Do you provide child care on a regular basis for which you are paid (full-time or part-time)?
- Where do you provide the care?
  - Child's home
  - Provider's home
- What is the going rate in your community for full day of care?
  - Pre-school child
  - Infant
  - School aged child

National Longitudinal Survey of Children and Youth, 1998

- Do you use child care such as daycare, babysitting, care by a relative or other caregiver, or a nursery school while you are at work or studying?
- Which of the following methods of child care do you use while you are at work or studying? How many hours per week is each type of care used?
  - Care provided in somebody else's home by a relative?
  - Care in own home by a relative other than a sister or brother of the child?
  - Care in own home by a non-relative?
  - Care in a before or after school program?
  - Care in a nursery school/preschool?
  - Care by a brother or sister of the child?
- Which type of arrangement do you consider your main one?

- Last summer, while your child was not in school, what type of child care arrangement did you use while you and your spouse/partner were at work/studying?
- When did you start using this main child care arrangement?
- Is this arrangement a temporary one, or do you think you will continue to have your child cared for by this caregiver for at least another six months?
- In the past 12 months, how many times have you changed your main child care arrangement and/or caregiver, excluding periods of care by yourself ?
- Overall, how many changes in child care arrangements has your child experienced since you began using child care, excluding periods of care by yourself or your spouse/partner?

Comments

- *Both the sector study reports and the NLSCY provide information on the various types of environments where care is available:*

  Child's home
  1. *Relative*
  2. *Non-relative*

  Provider's home
  3. *Unregulated*
     (a) *Relative*
     (b) *Non-relative*
  4. *Regulated*
     (a) *Family day care*
     (b) *Centre-based care*
     (c) *Enrichment programs*
- *The sector studies surveys have some information on affordability, which is a gap in the NLSCY.*
- *The NLSCY asks about the changes in child care, but gaps in content include: the time the child is in care, availability of care, and accessibility of care. These questions would be best asked of the parents of the NLSCY children.*

4.2 Characteristics of the care provider

Research shows that certain characteristics of care providers such as education, experience, licensing, and job satisfaction can impact on the quality of non-parental care. While almost all care providers are women, there are certain trends in the socio-demographic characteristics of care providers offering various types of care. For example, care providers working in the child's home tend to be younger, unmarried and childless. Individuals working in day care centres tend to be younger, and married with children. However, individuals providing family day care in their own home (whether regulated or unregulated), tend to be slightly older, married, and have children living at home with them. More providers working in the regulated sector (including those working in day care centres) had a post-secondary education than those working in the unregulated sector.

Box 2 Questions on the characteristics of the care provider

HRDC child care sector study reports, 1998

Socio-demographic characteristics:

- Gender
- Age
- Marital status
- Number and ages of children
- Income
- Province of residence
- Community population

Education and on-the-job training:

- What is the highest level of education that you have attained?
  - Not completed high school
  - High school diploma
  - Some college or university courses
  - College certificate
  - College diploma
  - Bachelor's degree
  - Post-graduate work or degree
- Is this activity available in your community?
  - Child development
  - Planning children's activities
  - Child guidance/behaviour management
  - Caregiver certificate training program
  - Nutrition
  - First aid/CPR
  - Income tax preparation/financial management
  - Written agreement with parents
  - Organizing the home for child care
  - Services for children with special needs
- Have you participated in the past 12 months?
- How long was the activity?
- Who paid for the activity?
- How satisfied are you with this support?
- Have you been required by your agency or licensing authority to take any special courses?
- If you have not taken courses, please rank relevance of reason for not taking courses?
  - Course is unavailable close to home
  - Timing conflicts with child care
  - Timing conflicts with needs of own children
  - Cannot see a benefit to training
  - No information available on relevant courses
  - Too costly
  - Lack of transportation
  - Already have qualifications

Experience:

- Total no. of years providing paid care (10 hrs or more/ week)...
- As a licensed home provider
  - Unregulated home provider
  - Provider working in another part of child care sector
- Total number of years of paid child care experience

Work week schedule:

- How many weeks did you provide care last year?
- Vacation/sick time?
- How long do you spend on child care related tasks?

Personal characteristics, job satisfaction:

- What title do you use to refer to yourself?
  - Caregiver
  - Child care provider
  - Family day care provider
  - Nanny
  - Babysitter
  - Uses first name
  - Day care provider
  - Grandparent
  - Educator
  - Housekeeper
  - Other relative
  - Home day care provider
- Are you a member of a group or association related to home child care?
- Reasons for providing home child care (list all reasons and main reason)?
  - Want to stay home with own children
  - Being own boss
  - Relatives or friends need care so they can work
  - Like children
  - To prepare children for school
  - There is need for good child care
  - To earn an income
  - Employment experience
- Do you expect to be working in field 3 years from now?
- If you could do it over again, would you choose to work in field?
- Please rate level of satisfaction on scale of 1 to 5 (very satisfied to very unsatisfied)?
  - Hours of work
  - Remuneration (pay)
  - Relationship with parents
  - Relationship with children in care
  - Relationship with licensing authority/agency
  - Licensing/agency requirements
  - Available supports and training
  - Respect for the profession by others

Licensing:

- Which statement best describes the arrangement under which you operate?
  - Personally hold a license to provide family-care
  - Work through a non-profit agency which is licensed
  - Work through a for-profit agency which is licensed
  - Work through a licensed agency, don't know if it is for profit or not
- Why did you chose to become licensed and/or work through an agency?
  - Easier to find families
  - More support services available
  - No negotiation with parents
  - Increased professionalism
  - To be able to take subsidized children

- Is your home inspected? How often? Who inspects your home?
  - Municipal or other government officials
  - Agency home visitors
  - Child care support programs
  - Social workers/special needs workers
- Why are you working privately? (scale of 1 to 5, not at all important, very important)
  - You want more control over your work
  - You want to be able to set your own fees
  - The licensing process was too complicated/long/expensive
  - You can care for more children

Benefits:
Which benefits do you receive?
  - Medical/dental
  - Group liability insurance
  - Disability insurance
  - pension outside CPP/QPP
  - sick leave
  - paid annual vacation
  - access to bulk purchasing equipment/toy lending or grant program
- What percentage of your income last year was spent on child care related expenses?

Community resource use:
- Is this resource available?
  - Parent/family resource centres
  - Care giver/drop in play groups
  - Home visits
  - Kits for start –up and/or operating home child care
  - Newsletters
  - Workshops
  - Child related telephone information services
- How often do you use it?
- How satisfied are you with this support?
- Who offers this support?
  - Agency
  - Government
  - College
  - resource centre/support program association

Other:
- Do you meet with other care providers? What for…
  - Children can play together
  - Joint outing for children
  - Coffee, adult conversation
  - Mutual support network
  - Training
- Do you have an assistant?
- For how long each day?

National Longitudinal Survey of Children and Youth, 1998

- To your knowledge, does this caregiver have any training in early childhood education, or child care, at the college or university level?

Comments

- *The sector studies surveys provide a great amount of detail in their questions on the characteristics of the provider, as the goal of the sector studies surveys was to profile the child care workforce (working outside of centres).*
- *There are many gaps in the NSLCY with regards to provider characteristics. The questions can only be asked of the providers themselves and would therefore need to be included in a provider survey and not in the parent survey.*
- *Major gaps include: details of the providers' training and experience, job satisfaction, licensing, and community resource use.*
- *The NLSCY currently asks parents only if their child's caregiver has any specialized child care training.*

4.3 Quality of non-parental care

Quality child care supports and assists the child's physical, emotional, social, linguistic, and intellectual development; and supports and complements the family in its child-rearing role. Quality child care also promotes the healthy development of children's competence, coping abilities and overall well-being (Beach, Bertrand, and Cleveland, 1998).

As mentioned previously, quality non-parental care includes structural and process aspects. The structural aspects of care include: group size, quality of the physical setting, caregiver training, and caregiver-child ratios. Process measures try to quantify the child-provider interaction or the actual care received by children; notably the affective (emotional) quality of interactions, the developmental appropriateness of the experiences and stimulation, and the sensitivity of the care-providers' responses and initiatives (Lamb, 1996).

The sector studies reports have detailed information on child care provider training and education experiences (profiled in the care provider characteristics section). These are key factors to good quality child care. The NLSCY however, only has one training question and could include other measures of non-parental care quality. The content issues covered in this section relate to the structural aspects of quality care including: adult-to-child ratios, and the length of time the child is in care. Other issues measured include barriers to non-parental care. Process quality is ideally measured through direct observation in the non-parental care environment. The NLSCY does have some indirect measures of process quality in the form of parental opinion of the caregivers interactions with the child.

Box 3 Questions on the quality of the care environment

HRDC child care sector study reports, 1998

- Please list all the children in your care…
  - For each child: age, length of time in provider's care, number of days per week in provider's care, time of arrival and departure each day, presence of special needs

National Longitudinal Survey of Children and Youth, 1998

- How many other children, if any, are cared for regularly by this caregiver, whether part-time or full-time (including her own children, for the following age groups?
  - Age 3-5 years
  - Age 6 and older
- How often would you say your caregiver praises and encourages your child, and responds promptly when he/she needs help or comforting?
- How often does your caregiver plan activities and use toys and other materials to help your child learn new things?
- How often does your caregiver encourage your child 's language development by talking to him/her and asking questions, as well as using songs and stories for this purpose?
- During the past 6 months, how well has your child gotten along with his/her main child care provider?

Comments

- *The sector study surveys and the NLSCY both have information on group size and caregiver-child ratios. In the NLSCY, these questions are currently asked of the parent, although the implementation of a care provider survey would allow for these questions to be asked of the provider herself.*
- *Quality of physical setting is an issue that has not been covered by either survey described in this section. This type of assessment is usually done through direct observation, which is not currently possible for the NLSCY.*
- *The NLSCY does have some measures of the affective quality of interaction between the caregiver and the child, but more detailed questions asked of the provider would be useful.*
- *Questions on the developmental appropriateness of experiences, sensitivity of providers responses and initiatives, and the intentionality of the provider would also better measure quality of care.*

4.4 Child Outcomes

An holistic view of development requires that the child's physical, social, emotional, language/communication and cognitive outcomes, separately and as a whole be the focus of research. Though each child grows and develops at a personal pace, progressive achievements are expected at certain ages or stages, often referred to as milestones. These outcomes are inter-related among themselves though each has a key role in the child's overall development. Some children may trail in one domain without serious consequences. It is also recognized that some outcomes are inputs for the next stage. For instance, language skills are important for learning and memory. However, it is also known that at each age, children exhibit varying mixes and levels of development.

It is important to identify the acceptable positive range, so that the overall cumulative gains in development to adulthood are achieved. The relationship between the developmental components of the framework with exceptional, positive, delayed and negative outcomes need to be captured. It is also recognized that the child can, in turn, affect the trajectory of development. The performance of the child is viewed in terms of the child's cohort as well as the stage of development. The NLSCY measures a wide range of outcomes that can be used when looking at the impact of non-parental care on child development.

Box 4 Child outcomes questions

National Longitudinal Survey of Children and Youth, 1998

Physical health
- Motor and Social Development scale
- Absence of illness
- Absence of injuries

Emotional health
- Temperament scale
- Behaviour scales

Social knowledge and competence
- About how many days a week does she do things with friends? (children aged 4 and older)
- About how many close friends does he/she have? Children aged 4 and older)
- Is he/she shy when meeting new friends? Children aged 4 and older)

Cognitive skills
- Peabody Picture Vocabulary Test – Revised (PPVT-R)

Comments

- *The sector studies surveys interviewed providers and not children. Therefore, these surveys do not offer any information on child outcomes. Other large scale surveys conducted in other countries have used outcomes similar to the NLSCY. Information on a wide range of outcomes allows for research to look at the many ways that non-parental care can impact on child outcomes.*

4.5 Summary

Overall, the content of both the HRIB and the NLSCY surveys demonstrate that a variety of information on the child's care environment is possible to obtain. Information on the type of care, the characteristics of the care provider, and the quality of the care can be used to study the link between non-parental care and child outcomes. This information can be obtained by surveying parents and caregivers of their children through the NLSCY. Additional questions for parents could help fill some gaps in content (cost, accessibility of care, etc.). A new survey of care providers could provide data on quality of care, particularly process indicators, by adding

some questions on the characteristics of the care provider, training and education, the types of activities the provider does with the child, and the provider's intentionality in providing care (the reasons the provider cares for children).

5. Review of survey methods: processes used to interview care providers

The NLSCY must collect information from all types of non-parental care providers: those working within the child's home, those working in both regulated and unregulated family-care settings, and those working in day care centres. The provider may be either a relative or a non-relative. This requires a strategy for identifying them. The NLSCY would not randomly select care providers to survey, but would need to interview care providers of NLSCY children. This would allow for the linkage of non-parental care on child each outcome.

Several non-parental care provider surveys have previously been conducted in Canada (HRIB sector studies reports (1998) and Caring for a Living (1992)) and their experience in identifying respondents could help inform decisions on how to best approach contacting and interviewing providers. These surveys have interviewed both regulated and unregulated home providers and providers working in day care centres.

The NLSCY would potentially conduct a brief telephone survey of care providers of the NLSCY children. The method for obtaining a 10 minute telephone interview with the care providers of the NLSCY children must allow for interviews in all of the care scenarios previously described.

5.1 Interviewing regulated family-care providers

HRIB of HRDC conducted a sector study including a survey of regulated family providers in Canada. A list of 15, 939 providers was obtained and used as the sample frame. The sample for the survey consisted of approximately every 14th licensed home child care provider in Canada. The overall response rate was 50 percent with a low of 0 percent (3 providers) from P.E.I. to a high of 83 percent in Nova Scotia. Overall, a total of 1,107 providers responded from a stratified, random sample of 2,209. The information was deemed reliable at a national level. Some provincial/jurisdictional information was also possible.

The strength of this survey method included the fact that the sample was derived from actual lists of already registered/regulated child care providers. As well, mail out surveys were used. This method is a cost-effective way to conduct a survey, although potentially low response rates can

be a concern. Reminders about the survey were mailed out to providers two weeks after the initial survey was mailed out.

Because the questionnaire was a paper and pencil self-complete questionnaire, some potential biases among those not responding to the survey can exist. These include lower response rates from those who do not speak English or French as a first language or who have low literacy levels. As well, providers who were very committed to their job may have been more likely to fill out the questionnaire.

5.2 Interviewing unregulated family-care providers

HRIB hired Statistics Canada to conduct a pilot test to determine the best method to sample unregulated care providers. The approaches relied on parents in the Labour Force Survey (LFS) and used two methods to identify care providers:

Method 1. Parents in the LFS sample with children aged 0-12 were asked if they used unregulated non-parental care. If parents responded in the affirmative, they were asked to provide the interviewer with the name and phone number of the care provider. This method lead to a final response rate of only 36.2 percent. The expected response rate was 65 percent.

Method 2. LFS respondents were asked if anyone in their household provided unregulated non-parental care. This method lead to 1.3 percent of households responding that an unregulated care provider lived in the household. The expected percentage of households with an unregulated care provider was 3 percent.

The high costs of conducting this survey using the above two methods tested, combined with the low response rates, lead HRIB to examine a new methodology for identifying unregulated care providers. The new methodology used a random-digit dialing technique to first contact households, and then to ask if anyone in the household provided paid child care. The respondent was screened out if she provided regulated care. This methods was deemed as the most advantageous and was in the end the method that was used to survey unregulated care providers. A short telephone survey of unregulated providers was conducted and had a response rate of 70 percent. In that survey, the random digit dialing method worked well, although this issue is not applicable to the NLSCY because care provider information will be sought from the parents of

the NLSCY children. However, the challenges faced in trying to contact unregulated providers does highlight some important issues relevant to the NLSCY.

In the past, there have been concerns about successfully collecting information from unregulated caregivers. Parents using unregulated care and caregivers providing unregulated care are often wary of being asked questions and response rates in these surveys have often been lower than expected (Child care provider methodology report; sector studies (HRDC), 1998)). Fears about being surveyed could arise for two reasons: (1) the parents and/or caregiver may be concerned about the provision of accurate financial receipts to parents for income tax purposes; and (2) the parents and/or caregiver may be concerned about their compliance with provincial regulations regarding adult-to-child ratios or other regulations in the care setting.

5.3 Interviewing centre-based providers

The 1992 survey of centre-based providers "Caring for a Living" conducted surveys with both centre directors and staff. Centres were sampled based on the number of care centres in each province, the auspice of the centres (profit or non-profit status of the centre), and the average number of workers percentre in each province or territory. Directors of centres were interviewed on the telephone and sent a short questionnaire. Centre staff were sent a questionnaire in the mail. Reminder letters and phone calls were used as a follow up for questionnaire completion.

A total of 969 centres were selected for the sample with an expected response rate of 50 percent. Directors were telephoned to see if they would participate in the survey. Participating directors and staff were then sent paper and pencil questionnaires. The response rate for the director's questionnaire was 52 percent with some variation across provinces (ranging from a low of 33 percent in the Northwest Territories to a high of 71 percent in Saskatchewan). Response rates for the teaching staff questionnaire ranged from a low of 21 percent in Alberta to a high of 42 percent in Saskatchewan, with an average response rate of 34 percent.

There were several advantages to using a combined method of telephone and mail out surveys. The telephone call could be used to establish the appropriate respondent and could serve to establish a rapport between the interviewers and the respondents. The mail out surveys provided a cost-effective method of obtaining information. The disadvantages to using mail out surveys were discussed in the previous section.

5.4 Summary

Overall, the above experiences in interviewing non-parental care providers can help inform decisions for the NLSCY. The difficult issue of contacting the appropriate respondent is not an issue for the NLSCY in the same way it was for the previous surveys. Earlier surveys were concerned about contacting providers that provided a specific type of care only. For the NLSCY, the interest is in interviewing providers who provide all types of care for its sample of children. Therefore, the appropriate source for the contact information is very clear: the parents of the NLSCY children. The difficulty lies in obtaining permission from parents to contact their child's provider. Parents may have concerns such as: Will the NLSCY be evaluating their child's provider as good or bad? Will the NLSCY be asking about the cost of care, when this could be a sensitive matter (especially for parents who do not receive receipts for the care)? These issues will have to be addressed in order for the NLSCY care provider survey to be successful.

Some of the previous surveys of care providers had some difficulty obtaining good response rates. This is a challenge for the NLSCY survey because there will be two occasions for refusal to participate in the survey which could substantially diminish the response rates. First, the NLSCY parent could refuse to provide permission for Statistics Canada to contact the provider. Secondly, the care provider herself could refuse to participate in the survey. This procedure parallels the pilot survey of unregulated providers using method 1. As mentioned earlier, that survey had a response rate of only 36.2 percent. However, the NLSCY is a longitudinal survey, so parents are familiar with the survey and its rationale. This may reduce the number of refusals. Several options for data collection are possible, but the NLSCY must choose a course of action that is cost-effective and complimentary to the main survey.

Earlier surveys used a mail out survey and some used both a mail out survey and a telephone interview. Non-parental care providers could also be surveyed using a face-to-face interview. Based on previous work, both the telephone and mail out survey methods were effective. The face-to-face method is always the preferred method, but it is also the most costly and therefore not always possible.

6. Possible content and process strategies for collecting NLSCY non-parental care provider data

There are content and process issues to consider when recommending a strategy for selecting the appropriate respondent to questions (parents or care providers). Recommendations for obtaining permission from parents to contact their provider and selecting a survey method using telephone, mail-out, or face-to-face interviews will have to be developed.

6.1 Content recommendations

The NLSCY currently asks parents some questions about their child's non-parental care arrangements, but several gaps have been identified. Additional information could be asked of the parents of the NLSCY child without increasing response burden appreciably. Topics and questions include: when the child first entered any non-parental care arrangement, the cost of care, parents' satisfaction with their care arrangement, and the reasons for parents' choice of care arrangement. Please see a draft of the additional questions for parents in appendix A (also see Connor & Brink, in press).

Since it is necessary to also collect information from care providers, a separate instrument must be developed. Suggested questions for this survey are based on the NLSCY and other previously described surveys of non-parental care providers. As well, other surveys from Canada, the United States, and other countries were reviewed in order to make appropriate questionnaire content suggestions.

Important topics to measure in the survey include: provider socio-demographic information (including age, marital status, education and training experiences, job satisfaction, and intentionality), activities done with child while in care, description of program characteristics (adult-to-child ratio, age of children in care, type of care), and child behaviour. Please see attached draft questionnaire (appendix B) for the list of questions (also see Connor & Brink, in press).

The addition of these questions to the parent questionnaire and the survey for providers will help provide a more complete picture of the non-parental care received by children. These additions

will provide data which will allow for analysis of the quality of the child care environment and its impact on child outcomes.

6.2 Process recommendations

Process recommendations are not needed for the additional parent questions recommended. The process would be the same as for any other existing questions on the survey. However, process recommendations for the non-parental care provider questionnaire and highlighted here. Past surveys of unregulated care providers yielded several warnings about the risk of obtaining low response rates. There have been concerns in the past that parents didn't want to report the use of unregulated (as opposed to regulated) care. So a strategy for reducing the concerns of parents is essential. They must be assured that the information is confidential and will only be used for research.

Parents will be informed that the care provider questionnaire is part of the NLSCY project. As well, the parent will be able to review the care provider questionnaire before giving consent to contact the care provider. In doing so, parents will be reassured that providers are not being asked any controversial questions about their child or about the parents themselves.

Having the provider agree to participate in the survey may also prove to be difficult. There are a couple of solutions to any concerns the provider may have about providing information about one of the children in her care. The interviewer will be able to say that she obtained the provider's name from the child's parent. Hopefully, care providers will be more likely to participate if the child's parents have already given permission to contact the provider. Also, informing providers that parents have reviewed the content of the questionnaire, but that parents won't have access to the provider's responses might also help alleviate any caregiver concerns about confidentiality.

The recommendations for administering a non-parental care provider survey are as follows:

1. Parents of NLSCY children are asked for permission to conduct a short telephone interview with their child's care provider. Parents will be given the opportunity to review the care provider questionnaire.

2. The non-parental care provider will be telephoned and asked to participate in the survey. The provider will be told that the NLSCY child's parents have given the NLSCY interviewers permission to contact her. The provider will be told that the purpose of the survey is to measure all the important factors that influence the positive development of children and that the role of the child's care provider is extremely important in the development of the child. She will also be told that her answers will be confidential.

3. If the provider consents, a brief 10 minute phone interview will take place. Please see appendix A for the questionnaire (also see Connor & Brink, in press). The questions will cover information that is best provided by the care givers.

This method could be pilot tested to determine its effectiveness for the NLSCY.

Appendix A

Additional content for NLSCY parents

Section A: Child Care Arrangement

A.

A1. Approximately how much do you pay for child care each week?

A2. What other child care options did you consider in choosing your main child care

a.

care in a non-relative's home
care in a relative's home
care in your own home by a relative
care in your own home by a non relative
care in a before or after school program
care in an enrichment program
other, specify _____

In choosing your child care arrangements how important were each of the following factors:

somewhat important
not important

care can be provided in your home
the caregiver could accommodate more than one child in your family
flexible hours (i.e. if you had to work late)
location
cost
qualifications of the provider
the caregiver to child ratio
the types of activities and programs
provided
safe clean play spaces
your child would be taken on outings

What age was your child when he/she was first placed in a child care arrangement?

_____ months

A5.

Very satisfied
Somewhat satisfied

Very dissatisfied

A6. Since children spend much of their time in day care, their day care providers are uniquely placed to provide important information about the activities children do while in their care. Your co-operation would be appreciated to allow us to contact your child care provider for a short interview.

During this interview, we will ask the day care provider questions about the care givers interactions with the child and activities done while at day care.

Will you allow us to contact your day care provider?

Yes (obtain name and phone number of provider).

Name of day care provider_____

Phone Number_____

No

Appendix B

Survey of non-parental care providers

Section C: Non-parental care giver component

My name is *<name of interviewer>* and I m calling from Statistics Canada. May I please speak to *<name of caregiver>* ?

We are currently conducting the National Longitudinal Survey of Children and Youth on behalf of Human Resources Development Canada. This survey measures the development children in Canada including all of the factors that may influence the success of these children. The role that caregivers play in the lives of children is extremely important. We were given your name as caregiver by *<name of parent>* because *<name of child>* is part of the National Longitudinal Survey of Children and Youth. We would like to ask you a few questions about the types of activities you do when you provide care for children.

Although this survey is voluntary, your participation is important if the survey results are to be accurate. Under the Statistics Act your answers are strictly confidential.

I would like to begin by asking you a few questions about the *<name of child>*..

CA1. How long has *<name of child>* been in your care ?

_____ years _____ months

CA2. On a typical day, how many hours a day do you care for *<name of child>*?

_____ hours per day

CB1. On a typical day, how many other children, including your own, are in care at the same time as *<name of child>* ?

_____ children (if 0 go to CC1)

CB2. What are the ages of the other children in your care (including your own)?

Child 1	_____	Child 6	_____
Child 2	_____	Child 7	_____
Child 3	_____	Child 8	_____
Child 4	_____	Child 9	_____
Child 5	_____	Child 10	_____

CC1. The next set of questions deals with activities that *<name of child>* does every day.

Throughout a typical day, how many times a day does the child do the following...

three or more times
once or twice
not at all

a) look at books or listen to stories.
b) colour or paint.
c) do arts and crafts.
d) practice writing or printing
e) take part in physical play like running and jumping.
f) play video or computer games.
g) play pretend (or fantasy) games (puppets, play "school")
h) listen to music or sing songs.
i) take naps or rest quietly.

CC2. How many hours a day does *<name of child>* watch TV or videos.

No hours.
1 to 2 hours.
3 or more hours per day.

CC3. Now I am going to ask you about some of the outings that you might do with *<name of child>*.

How often do you do the following things with the child ...

daily
weekly
occasionally
not at all

a) go to parks or playgrounds.
b) go to the library.
c) go to museums or zoos.
d) go to shopping malls.
e) go to play groups or drop-in centres.
f) go to visit other friends with children.
g) go to music, dance, sports, or other lessons.

CD1. I am now going to ask you some questions about your relationship with <name of child>. For each statement I read, tell me if the statement never applies, sometimes applies or always applies.

never applies
sometimes applies
always applies

a) If upset, the child will seek comfort from me.
b) The child and I always seem to be struggling with each other. (i.e. having a hard time getting along).
c) It is easy to know what the child is feeling.
d) The child remains angry or is resistant (uncooperative) after being disciplined.

CD2. On a typical day, how often do you have a chance to have a conversation of at least a few minutes with the child?

Almost never
Sometimes
Often
Always

CD3. The next set of questions are about taking care of the child. How important to you is each of the following?

very important
somewhat important
not at all important

a) Showing warmth to the child. (Showing that you care).
b) Providing individual attention to the child.
c) Allowing the child to make his or her decisions whenever possible.
d) Disciplining the child.
e) Encouraging the child to express him/herself.
f) Being strict with the child.
g) Communicating with the child's parents.

CD4. How much do you agree with the following statement? I think that the child will do well in school.

Strongly agree
Somewhat agree
Somewhat disagree
Strongly disagree

CE1. I am now going to ask you about some of the reasons that you provide care. Please tell me if the following is a strong reason, a weak reason, or not a reason in your decision to become a child care provider. I became a child care provider...

strong reason
week reason
not a reason at all

a) To be with young children.
b) To make money.
c) So I can get children off to a good start (so that I can help children learn and grow).
d) Because I get a lot out of it.
e) So that I can be at home with my own children.
f) So I can be my own boss.
g) Other. Please specify_____

CF. I would like to now ask you a few questions about yourself.

CF1. What is your gender?

Female
Male

CF2. To which age group do you belong? Are you ...

Less than 20 years old
20 – 29 years old
30 – 39 years old
40 – 49 years old
50 – 59 years old
60 years old or over

CF3. What is the highest education level you have attained?

Less than a high school diploma
High school diploma
Some college or university courses
College certificate (1 year) or diploma (2 or more years)
Bachelor's degree or higher

CF4. Do you have a certificate, diploma, or degree in Early Childhood Education (ECE)?

Yes (go to CG)
No

CF5. Are you taking courses to work towards obtaining a certificate, diploma, or degree in Early Childhood Education (ECE)?

Yes
No

CG. Now I have a few questions about other training and development opportunities related to child care.

CG1. First, I would like to ask you about your experience working in the child care field. Excluding care for your own children, how many years of **unpaid** experience do you have caring for children? Please exclude occasional babysitting.

_____ years _____ months

CG2. Now, how many years of **paid** experience do you have caring for children? Please exclude occasional babysitting.

_____ years _____ months

CG3. Have you taken any of the following types of training...(Mark all that apply)

Courses in child care?
Babysitting course?
Courses in nutrition?
Courses related to child development (psychology, family studies)?
Planning children's activities?
Co-op placement or internship in child care?
Parenting course?
Workshops/conferences?
CPR and/or First Aid?
Other (please specify) _____

CG4. Which statement best describes the arrangement under which you operate:

a. I work for a licensed for-profit day care centre
b. I work for a licensed non-profit day care centre
c. I personally hold a license to provide family day care
d. I work through a non-profit agency which is licensed
e. I work through a for-profit agency which is licensed
f. I work through a licensed agency, don't know if it is for profit or not for profit
g. Other. Please specify _____.

CG5. In general, how satisfied are you with your job caring for children, would that be?

Very satisfied
Somewhat satisfied
Somewhat dissatisfied
Very dissatisfied

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